

O.C.  
10/21  
AG

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION            | INITIALS | ID NO. | DATE     |
|---------------------|----------|--------|----------|
| FEE DETERMINATION   | Sm       |        |          |
| O.I.P.E. CLASSIFIER |          | 12     | 10/6/99  |
| FORMALITY REVIEW    | RR       | 76029  | 10/19/99 |

### INDEX OF CLAIMS

- ✓ ..... Rejected  
 = ..... Allowed  
 - (Through numeral) Canceled  
 + ..... Restricted
- N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

| Claim | Final | Original | Date |
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| Claim | Final | Original | Date |
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Best Available Copy

If more than 150 claims or 10 actions  
 staple additional sheet here